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APPLICANTS

Michael J. Brookman, Branford, CT;

** CONTINUING DATA *****
 This application is a CON of 10/393,346 03/21/2003

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
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Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY CT	SHEETS DRAWING 6	TOTAL CLAIMS 5	INDEPENDENT CLAIMS 1
Verified and Acknowledged	Examiner's Signature <i>all</i> Initials				

ADDRESS
 04743
 MARSHALL, GERSTEIN & BORUN LLP
 233 S. WACKER DRIVE, SUITE 6300
 SEARS TOWER
 CHICAGO , IL
 60606

TITLE
 Powered air purifying respirator system and breathing apparatus

FILING FEE RECEIVED 880	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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